

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2003Open to Public
Inspection**A** For the 2003 calendar year, or tax year beginning

and ending

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☒ Amended return
☐ Application pending

Please use IRS label or print or type See Specific Instructions

C Name of organization

Institute for Legal Reform

Number and street (or P O box if mail is not delivered to street address)

1615 H Street NW

Room/suite

City or town, state or country, and ZIP + 4

Washington, DC 20062

D Employer identification number

52-2109035

E Telephone number

202-463-5590

F Accounting method ☐ Cash ☒ Accrual
☐ Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates ▶**H(c)** Are all affiliates included? **N/A** ☐ Yes ☐ No
(If "No," attach a list.)**H(d)** Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No**I** Group Exemption Number ▶**G** Website: ▶ www.LegalReformNow.com**J** Organization type (check only one) ☒ 501(c) (6) (insert no) ☐ 4947(a)(1) or ☐ 527**K** Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.**L** Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶

38116501.

M Check ☐ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received		1a	38116501.	1d	38116501.
	a	Direct public support		1b			
	b	Indirect public support		1c			
	c	Government contributions (grants)					
	d	Total (add lines 1a through 1c) (cash \$ 38116501. noncash \$)					
	2	Program service revenue including government fees and contracts (from Part VII, line 93)				2	
	3	Membership dues and assessments				3	
	4	Interest on savings and temporary cash investments				4	
	5	Dividends and interest from securities				5	
	6a	Gross rents		6a		6c	
	b	Less rental expenses		6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)					
7	Other investment income (describe ▶)				7		
Expenses	8a	Gross amount from sales of assets other than inventory		(A) Securities	8a	(B) Other	
	b	Less cost or other basis and sales expenses		8b			
	c	Gain or (loss) (attach schedule)		8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (B))				8d	
	9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>					
	a	Gross revenue (not including \$ of contributions reported on line 1a)		9a		9c	
	b	Less direct expenses other than fundraising expenses		9b			
	c	Net income or (loss) from special events (subtract line 9b from line 9a)					
	10a	Gross sales of inventory, less returns and allowances		10a		10c	
	b	Less cost of goods sold		10b			
	c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)					
	11	Other revenue (from Part VII, line 103)				11	
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)				12	38116501.	
Net Assets	13	Program services (from line 44, column (B))				13	
	14	Management and general (from line 44, column (C))				14	
	15	Fundraising (from line 44, column (D))				15	
	16	Payments to affiliates (attach schedule)				16	
	17	Total expenses (add lines 16 and 44, column (A))				17	28447805.
	18	Excess or (deficit) for the year (subtract line 17 from line 12)				18	9668696.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))				19	3537672.
	20	Other changes in net assets or fund balances (attach explanation)				20	0.
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)				21	13206368.

323001
12-17-03

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2003)

Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others Page 2

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)				
	cash \$ _____ noncash \$ _____	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25	346215.		
26	Other salaries and wages	26	1095959.		
27	Pension plan contributions	27			
28	Other employee benefits	28	358280.		
29	Payroll taxes	29			
30	Professional fundraising fees	30			
31	Accounting fees	31	15829.		
32	Legal fees	32	5417934.		
33	Supplies	33	26889.		
34	Telephone	34	62096.		
35	Postage and shipping	35	23602.		
36	Occupancy	36			
37	Equipment rental and maintenance	37	5984.		
38	Printing and publications	38	75544.		
39	Travel	39	225308.		
40	Conferences, conventions, and meetings	40	26733.		
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule)	42			
43	Other expenses not covered above (itemize)				
a		43a			
b		43b			
c		43c			
d		43d			
e	See Statement 1	43e	20767432.		
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	28447805.		

Joint Costs. Check ☐ if you are following SOP 98-2Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____,

(iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service AccomplishmentsWhat is the organization's primary exempt purpose? ☐Educate public on reform of American legal system

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others)

a	Sponsors conferences and engages in activities to advance the education of the public on issues relating to reform of the American Legal and Judicial system	(Grants and allocations \$ _____)
b		(Grants and allocations \$ _____)
c		(Grants and allocations \$ _____)
d		(Grants and allocations \$ _____)
e	Other program services (attach schedule)	(Grants and allocations \$ _____)
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	

Part IV Balance Sheets

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
Assets	45 Cash - non-interest-bearing		45		
	46 Savings and temporary cash investments		46		
	47 a Accounts receivable	47a			
	b Less allowance for doubtful accounts	47b		47c	
	48 a Pledges receivable	48a	13421368.		
	b Less allowance for doubtful accounts	48b	215000.	48c	
	49 Grants receivable			49	
	50 Receivables from officers, directors, trustees, and key employees			50	
	51 a Other notes and loans receivable	51a			
	b Less allowance for doubtful accounts	51b		51c	
	52 Inventories for sale or use			52	
	53 Prepaid expenses and deferred charges			53	
	54 Investments - securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
	55 a Investments - land, buildings, and equipment, basis	55a			
	b Less accumulated depreciation	55b		55c	
56 Investments - other			56		
57 a Land, buildings, and equipment basis	57a				
b Less accumulated depreciation	57b		57c		
58 Other assets (describe <input type="checkbox"/>)			58		
59 Total assets (add lines 45 through 58) (must equal line 74)		4878330.	59	13206368.	
Liabilities	60 Accounts payable and accrued expenses		1340658.	60	
	61 Grants payable			61	
	62 Deferred revenue			62	
	63 Loans from officers, directors, trustees, and key employees			63	
	64 a Tax-exempt bond liabilities			64a	
	b Mortgages and other notes payable			64b	
	65 Other liabilities (describe <input type="checkbox"/>)			65	
66 Total liabilities (add lines 60 through 65)		1340658.	66	0.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67 Unrestricted		3537672.	67	8838368.
	68 Temporarily restricted			68	4368000.
	69 Permanently restricted			69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
	70 Capital stock, trust principal, or current funds			70	
	71 Paid-in or capital surplus, or land, building, and equipment fund			71	
	72 Retained earnings, endowment, accumulated income, or other funds			72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)		3537672.	73	13206368.
	74 Total liabilities and net assets / fund balances (add lines 66 and 73)		4878330.	74	13206368.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

a	Total revenue, gains, and other support per audited financial statements	a	37737000.
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments \$		
(2)	Donated services and use of facilities \$		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify) Stmt 2 \$ -379501.		
	Add amounts on lines (1) through (4)	b	-379501.
c	Line a minus line b	c	38116501.
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify) \$		
	Add amounts on lines (1) and (2)	d	0.
e	Total revenue per line 12, Form 990 (line c plus line d)	e	38116501.

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements	a	30328000.
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities \$		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 \$		
(4)	Other (specify) Stmt 3 \$ 1880195.		
	Add amounts on lines (1) through (4)	b	1880195.
c	Line a minus line b	c	28447805.
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify) \$		
	Add amounts on lines (1) and (2)	d	0.
e	Total expenses per line 17, Form 990 (line c plus line d)	e	28447805.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Lisa Rickard 1615 H St NW Washington, DC 20062-2000	President	40	346215.	13140.
Judy Richmond 1615 H St NW Washington, DC 20062-2000	Secretary	1	0.	0.
Tom Donohue 1615 H St NW Washington, DC 20062-2000	CEO	1	0.	0.
Stan Harrell 1615 H St NW Washington, DC 20062-2000	Treasurer	1	0.	0.
Stephen Bokar 1615 H St NW Washington, DC 20062-2000	Assistant Secretary	1	0.	0.
See Attached List of Uncompensated			0.	0.
Board Members			0.	0.
			0.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule. ☒ Yes ☐ No

Part VI Other Information

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b	
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b If "Yes," enter the name of the organization See Statement 4 and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a Enter direct or indirect political expenditures See line 81 instructions 81a 4519836.		
b Did the organization file Form 1120-POL for this year?	81b	X
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) 82b N/A		
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	X
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	X
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b	X
c Dues, assessments, and similar amounts from members 85c 38116501.		
d Section 162(e) lobbying and political expenditures 85d 18015287.		
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e 18043191.		
f Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f -27904.		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h	
86 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on line 12 86a N/A		
b Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87 501(c)(12) organizations. Enter a Gross income from members or shareholders 87a N/A		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b N/A		
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911 N/A , section 4912 N/A , section 4955 N/A		
b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction N/A	89b	
c Enter. Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 N/A		
d Enter. Amount of tax on line 89c, above, reimbursed by the organization N/A		
90 a List the states with which a copy of this return is filed District of Columbia		
b Number of employees employed in the pay period that includes March 12, 2003 90b 0		
91 The books are in care of Stan Harrell Telephone no 202-463-5590		

Located at **1615 H St NW, Washington, DC**ZIP + 4 **20062-2000**

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here ☐
and enter the amount of tax-exempt interest received or accrued during the tax year **92** N/A

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

93 Program service revenue

a _____
b _____
c _____
d _____
e _____

f Medicare/Medicaid payments

g Fees and contracts from government agencies

94 Membership dues and assessments**95** Interest on savings and temporary cash investments**96** Dividends and interest from securities**97** Net rental income or (loss) from real estate:

a debt-financed property

b not debt-financed property

98 Net rental income or (loss) from personal property**99** Other investment income**100** Gain or (loss) from sales of assets

other than inventory

101 Net income or (loss) from special events**102** Gross profit or (loss) from sales of inventory**103** Other revenue

a _____
b _____
c _____
d _____
e _____

104 Subtotal (add columns (B), (D), and (E))**105** Total (add line 104, columns (B), (D), and (E))

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No. Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
	Signature of officer <i>Stan M. Harrell</i>	Date 11/5/06
Paid Preparer's Use Only	Stan M Harrell, SVP, CFO & CIO	
	Preparer's signature <i>Jennifer O'Rourke</i>	Date 11-8-06
	Firm's name (or yours if self-employed), address, and ZIP + 4 Ernst and Young LLP 5451 Lakeview Pkwy Indianapolis, IN 46268	Check if self-employed <input type="checkbox"/> Preparer's SSN or PTIN EIN <i>34-6565596</i> Phone no <i>317-280-3472</i>

Form 990	Other Expenses	Statement	1
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Description	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
Advertising	2359621.			
Consulting	9244878.			
Professional Dues and Subscriptions	73504.			
Administrative Support Services	1169686.			
Contributions	7645158.			
Bad Debt Expense	274585.			
Total to Fm 990, ln 43	20767432.			

Form 990	Other Revenue Not Included on Form 990	Statement	2
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Description	Amount
Revenues from Affiliates	-379501.
Total to Form 990, Part IV-A	-379501.

Form 990	Other Expenses Not Included on Form 990	Statement	3
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Description	Amount
Expenses from Affiliates	1880195.
Total to Form 990, Part IV-B	1880195.

Form 990	Identification of Related Organizations Part VI, Line 80b	Statement	4
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Name of Organization	Exempt	NonExempt
National Chamber Litigation Center	X	
National Asbestos Defense Resource Council	X	
National Chamber Foundation	X	
Chamber of Commerce of the USA	X	
Center for Workforce Preparation	X	
Coalition for Reform	X	
US Chamber Foundation for Legal Reform	X	

Center for Corporate Citizenship

X

STATEMENT 5					
Institute For Legal Reform		Form 990 Part V Item 75			
EIN: 52-2109035					
Name	Related Organization	Compensation	Contribution to Plans		
Thomas J Donohue	US Chamber of Commerce	1,639,540	18,335	*	
Stan M Harrell	US Chamber of Commerce	253,138	12,385		
Judy Richmond	US Chamber of Commerce	114,585	6,727		
Stephan Bokar	US Chamber of Commerce	202,696	11,380		

** The organization also provides to the employee certain supplemental retirement benefits that are not included in the reported amount. This benefit is computed on the employee's total compensation less the compensation up to the limit for tax-qualified retirement plans. These benefits provide retirement income for an accumulated nineteen year service period in accordance with the employee's employment contract. For the reported year, the organization incurred an obligation to provide at a future date total supplemental retirement benefits valued at \$7,390,184. It should be noted that the parties have agreed that no additional supplemental retirement benefits will be accrued during any future service the employee provides to the organization.*

Institute For Legal Reform
Statement 6
Form 990 Part VI Item 90b
EIN: 52-2109035

Have consolidated payroll where all employees are employees of an affiliated organization, the Chamber of Commerce of the USA. The salaries expense is the portion chargeable to ILR

Institute For Legal Reform
Statement 7
Form 990 Part VI Item 81b
EIN: 52-2109035

ILR did not have to file an 1120 POL because ILR had no interest or investment income.

As of 11/19/03

**DIRECTORS OF THE
U.S. CHAMBER INSTITUTE FOR LEGAL REFORM
2003**

Chairman

Mr. Samuel K. Skinner
Chairman, Retired
1615 H Street, NW
Washington, DC 20062

Mr. John Castellani
1615 H Street, NW
Washington, DC 20062

Chief Executive Officer

Mr. Thomas J. Donohue
President and Chief Executive Officer
1615 H Street, NW
Washington, DC 20062

Mr. Brackett B. Denniston III
1615 H Street, NW
Washington, DC 20062

Chief Operating Officer

Mr. Stanton D. Anderson
1615 H Street, NW
Washington, DC 20062

Mr. Dwight Evans
1615 H Street, NW
Washington, DC 20062

Dr. Thomas M. Gorrie
1615 H Street, NW
Washington, DC 20062

President

Ms. Lisa A. Rickard
President
1615 H Street, NW
Washington, DC 20062

Mr. Thomas A. Gottschalk
1615 H Street, NW
Washington, DC 20062

Mr. William F. Aldinger
1615 H Street, NW
Washington, DC 20062

Mr. Maurice R. Greenberg
1615 H Street, NW
Washington, DC 20062

Mr. Patrick S. Baird
1615 H Street, NW
Washington, DC 20062

Mr. James H. Hance, Jr.
1615 H Street, NW
Washington, DC 20062

Mr. James E. Barrett
1615 H Street, NW
Washington, DC 20062

Mr. Allen Hill
Vice President
1615 H Street, NW
Washington, DC 20062

Mr. Steve Bartlett
1615 H Street, NW
Washington, DC 20062

Mr. Louis L. Hoynes
1615 H Street, NW
Washington, DC 20062

Mr. Tom Hyde
1615 H Street, NW
Washington, DC 20062

Mr. Francis A. Keating II
1615 H Street, NW
Washington, DC 20062

Mr. Jeffery B. Kindler
1615 H Street, NW
Washington, DC 20062

Mr. Kent Knutson
1615 H Street, NW
Washington, DC 20062

Mr. David J. Lubben
1615 H Street, NW
Washington, DC 20062

Mr. Richard Manetta
1615 H Street, NW
Washington, DC 20062

Mr. Robert J. O'Connell
1615 H Street, NW
Washington, DC 20062

Mr. Robert W. Pike
1615 H Street, NW
Washington, DC 20062

Mr. Edward B. Rust, Jr.
1615 H Street, NW
Washington, DC 20062

Mr. Ed Stratemeier
1615 H Street, NW
Washington, DC 20062

Mr. Lee M. Thomas
1615 H Street, NW
Washington, DC 20062

Mr. Mark Treanor
1615 H Street, NW
Washington, DC 20062